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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or **Fax** (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

24319 7590 06/29/2004

LSI LOGIC CORPORATION
1621 BARBER LANE
MS: D-106 LEGAL
MILPITAS, CA 95035

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmittal.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Manu Kashyap (Depositor's name)
[Signature] (Signature)
July 12, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/842,335	04/25/2001	Christopher L. Hamlin	00-695	7540

TITLE OF INVENTION: PARADIGM FOR INTER-NETWORKED STORAGE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	09/29/2004
EXAMINER		ART UNIT	CLASS-SUBCLASS		
BUTLER, DENNIS		2115	713-001000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Suiter West PC LLO

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

LSI Logic Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Milpitas, California USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☐ Publication Fee
☐ Advance Order - # of Copies

4b. Payment of Fee(s):

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☐ Payment by credit card. Form PTO-2038 is attached.

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(Authorized Signature) Leo Peters (Date) July 12, 2004

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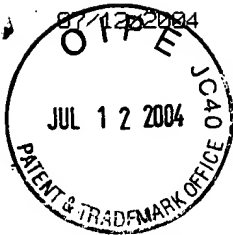
07/13/2004 AWONDAF2 00000060 122252 09842335

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TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

**FAX COVER SHEET**

LSI LOGIC CORPORATION
Office of General Counsel
1621 Barber Lane
M/S D-106
Milpitas, CA 95035
Fax: (408) 433-7460

Date: July 12, 2004
To **Name:** USPTO – Box: Issue Fee
Fax: (703) 746-4000
Phone: (703) 305-8283

From: **Name:** Manu Kashyap, Intellectual Property Paralegal
Corporate Legal Dept.
Telephone: (408) 433-7475
Fax: (408) 433-7460
Re: 09/842,335

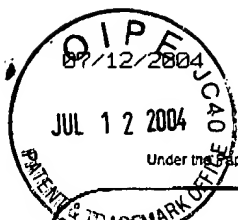
Number of Pages Including this Page 3

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MESSAGE:

US Serial No.: 09/842,335
Filing Date: April 25, 2001
Group Art Unit: 2115
Docket No. 00-695
Examiner: Dennis Butler
Payment of Issue Fee

Please notify us immediately if any pages are not received.



15:43

LSI LOGIC LEGAL IP → 917037464000

NO.924 0003

PTO/SB/1

Approved for use through 9/30/2000. OMB 0351-0032
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FEE TRANSMITTAL

Patent Fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$1330.00)**Complete if Known**

Application Number	09/842,335
Filing Date	April-25, 2001
First Named Inventor	Christopher Hamlin
Group Art Unit	2115
Examiner Name	Dennis Butler
Attorney Docket No.	/ 00-695

METHOD OF PAYMENT (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:

Deposit Account Number

12-2252

Deposit Account Number

LSI LOGIC CORPORATION



Charge Any Additional Fee required Under 37



Charge the Issue Fee Set in 37 C.F.R. 1.18 at the Mailing of the Notice of

- 2.
- ☐
- Payment Enclosed:



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Money Order



Other

FEE CALCULATION**1. BASIC FILING FEE**

Larg eFee Code	Entt yFee (\$)	Larg eFee Code	Entt yFee (\$)	Fee Description	Fee Paid
101	790	201	395	Utility filing fee	
106	330	206	165	Design filing fee	
107	540	207	270	Plant filing fee	
108	790	208	395	Reissue filing fee	
114	150	214	75	Provisional Filing fee	

SUBTOTAL (1) (\$0.00)**2. EXTRA CLAIM FEES**

	Extra Claim	Fee from below	Fee Paid
Total claim	-20**=		
Independent Claims	-3**=		
Multiple Dependent			

**or number previously paid, if greater; For Reissues, see below

Larg eFee Code	Entt yFee (\$)	Larg eFee Code	Entt yFee (\$)	Fee Description
103	22	203	11	Claims in excess of 20
102	82	202	41	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	82	209	41	**Reissue independent claims over original patent
110	22	210	11	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$0.00)**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Larg eFee Code	Entt yFee (\$)	Larg eFee Code	Entt yFee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing request for reexamination	
112	920*	112	920	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	950	217	475	Extension for reply within third month	
118	1510	218	755	Extension for reply within fourth month	
128	2,080	228	1,030	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,320	241	660	Petition to revive - unintentional	
142	1,320	242	660	Utility issue fee (or reissue)	1330
143	450	243	225	Design issue fee	
144	670	244	335	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional application	
126	240	126	240	Submission of Information Disclosure Statement	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129)	
149	790	249	395	For each additional invention to be examined (37 CFR 1.129 (b))	
Other fee (specify)				PUBLICATION FEE	
Other fee (specify)					

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$1330.00)**SUBMITTED BY**

Typed or printed name

Leo Peters

Signature

Date

7/12/04

Complete (if applicable)

Reg. Number

33,562

Deposit Account User ID

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